OIPE E

JC02 Rec'd PCT/PTC	25 MAY	2005
A Company of the Comp		777 /725

<u>**</u>					
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	10/520,476		
		Filing Date	January 30, 2005		
		First Named Inventor	Claude Moufflet		
		'υ _{-,}	Art Unit	and the state of t	
			Examiner Name		
Total Number of	Pages in This Submission	on 10	Attorney Docket Number	15675P565	
ENCLOSURES (check all that apply)					
Fee Transmittal	Form	Drawing(s))	After Allowance Communication to Group	
Fee Attac	hed	Licensing-r	elated Papers	Appeal Communication to Board of Appeals and Interferences	
Amendment / Re	esponse	Petition		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)	
After Fina Affidavits	ıl /declaration(s)	Petition to C Provisional	Convert a Application	Proprietary Information	
Extension of Tim	ne Request	Power of A Change of	ttorney, Revocation Correspondence Address	Status Letter	
Express Abando	nment Request	Terminal C	Disclaimer	Other Enclosure(s) (please identify below):	
	losure Statement	Request for		EPO Search Report; 2 prior art references; return postcard	
Certified Copy of Document(s)		CD, Number	er of CD(s)		
Response to Mis	esing Parts/ ication c Filing Fee aration/POA e to Missing ler 37 CFR	Remarks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT					
Firm or	Eric S. Hyman, Reg. No. 30,139				
Individual name	BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP				
Signature					
Date (Sholds					
CERTIFICATE OF MAILING/TRANSMISSION					
I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.					
Typed or printed name Melissa Stead					
Signature Mela Mela Steel Date 5:23 05					

for FY 2005 Filing Date January 30, 2005 Patent fees are subject to annual revision. First Named Inventor Claude Moufflet **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27. Art Unit TOTAL AMOUNT OF PAYMENT Attorney Docket No. 15675P565 METHOD OF PAYMENT (check all that apply) ☐ Check ☐ Credit card ☐ Money Order ☐ None Other (please identify): Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP Deposit Account Deposit Account Number: 02-2666 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below, except for the filing fee ☑ Charge fee(s) indicated below Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. **FEE CALCULATION** Large Entity Small Entity Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$) 1051 130 2051 65 Surcharge - late filing fee or oath 1052 50 2052 ²⁵ Surcharge - late provisional filing fee or cover sheet. 2053 130 2053 130 Non-English specification 1251 120 2251 60 Extension for reply within first month 450 2252 1252 225 Extension for reply within second month 1,020 2253 1253 510 Extension for reply within third month 1254 1,590 2254 795 Extension for reply within fourth month 2255 1255 2,160 1,080 Extension for reply within fifth month 1401 500 2401 ²⁵⁰ Notice of Appeal 1402 500 2402 ²⁵⁰ Filing a brief in support of an appeal 1403 1,000 2403 500 Request for oral hearing 1451 1,510 2451 1,510 Petition to institute a public use proceeding 1460 130 2460 130 Petitions to the Commissioner 1807 50 1807 ⁵⁰ Processing fee under 37 CFR 1.17(q) 1806 180 Submission of Information Disclosure Stmt 1806 180 790 1809 395 Filing a submission after final rejection (37 CFR § 1.129(a)) 1809 1810 2810 395 For each additional invention to be examined (37 CFR § 1.129(b)) 790 Other fee (specify) SUBTOTAL (2) SUBMITTED BY Complete (if applicable) Registration No. (310) 207-3800 Name (Print/Type) Telephone Eric S. Hyman 30,139 (Attorney/Agent) 5/20/05 Date Signature

dr) 12/15/2004.

Application Number

FEE TRANSMITTAL

Based on PTO/SB/17 (12-04) as modified by Blakely, Solokoff, Taylor & Zaft SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 223

Complete if Known

10/520,476